

W0400000 51426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

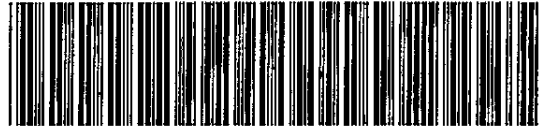
(Business Entity Name)

(Document Number)

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W04-51426  
OK

July 5, 2004

Daniel J. Mallon  
215 Longley Drive  
Port Charlotte, FL 33954  
941-255-1984

To Whom It May Concern:

This letter is to state my intention for a Limited Liability Company in the State of Florida.

The name chosen will be Dan Mallon Siding L.L.C.

Please accept this cover letter to go along with the application submitted.

Thank you

Thank you  
  
 Daniel J. Mallon

Daniel J. Mallon

**THE**

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: Dan Mallon. Siding L.L.C.

### ARTICLE II - Address:

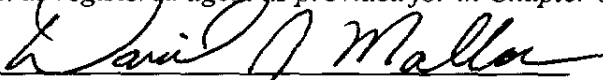
The mailing address and street address of the principal office of the Limited Liability Company is:  
215 Longley Drive Port Charlotte Florida 33954

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

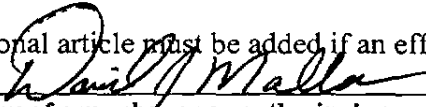
The name and the Florida street address of the registered agent are:

Daniel J. Mallon  
Name  
215 Longley Drive  
Florida street address (P.O. Box **NOT** acceptable)  
Port Charlotte FL 33954  
City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

  
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Daniel J. Mallon  
Typed or printed name of signee

#### Filing Fees:

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Dan Mallon Siding L.L.C.

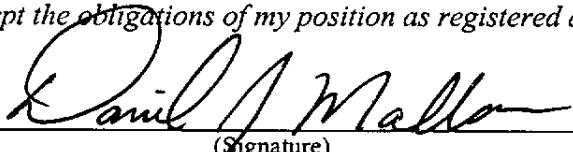
2. The name and the Florida street address of the registered agent and office are:

Daniel J. Mallon  
(Name)

215 Longley Drive  
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Port Charlotte FL 33954  
City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

  
(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)